

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
CAND 435
(CAND Rev. 08/2018)

TRANSCRIPT ORDER
Please use one form per court reporter.
CJA counsel please use Form CJA24
Please read instructions on next page.

COURT USE ONLY
DUE DATE:

1a. CONTACT PERSON FOR THIS ORDER
Leah Nylen

2a. CONTACT PHONE NUMBER
(202) 660-2971

3. CONTACT EMAIL ADDRESS
Inylen2@bloomberg.net

1b. ATTORNEY NAME (if different)

2b. ATTORNEY PHONE NUMBER

3. ATTORNEY EMAIL ADDRESS

4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE)
Bloomberg News
1101 New York Ave NW, Suite 900
Washington, DC 20005

5. CASE NAME
Epic Games, Inc. v. Apple Inc.

6. CASE NUMBER
20-cv-05640

7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ ☐ FTR
Raynee Mercado

8. THIS TRANSCRIPT ORDER IS FOR:
☐ APPEAL ☐ CRIMINAL ☐ In forma pauperis (NOTE: Court order for transcripts must be attached)
☐ NON-APPEAL ☒ CIVIL CJA: Do not use this form: use Form CJA24.

9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:

| a. HEARING(S) (OR PORTIONS OF HEARINGS) | | b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.) | | | | | | | | | | c. DELIVERY TYPE (Choose one per line) | | | | |
|---|------------------|--|--|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|-----------------------|----------------------------------|-----------------------|-----------------------|
| DATE | JUDGE (initials) | TYPE (e.g. CMC) | PORTION If requesting less than full hearing, specify portion (e.g. witness or time) | PDF (email) | TEXT/ASCII (email) | PAPER | CONDENSED (email) | ECF ACCESS (web) | ORDINARY (30-day) | 14-Day | EXPEDITED (7-day) | 3-DAY | DAILY (Next day) | HOURLY (2 hrs) | REALTIME | |
| 05/08/2024 | YGR | Hrg. | | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| | | | | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:

ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).

11. SIGNATURE /s/ Leah Nylen

12. DATE 05/09/2024

Clear Form

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